

P. O. BOX



Update on the Happenings of HCFA's Managed Care Systems and Support Operations

Health Plan Payment and Operations Support, CHPP - Health Care Financing Administration

CONTENTS:

UUNET VENDOR SERVICE ENDING	1
REVISED YEAR 2000 PLAN GHP MONTHLY SCHEDULE	1
MISSING WORKING-AGED TRANSACTIONS ON THE GROUCH REPORT	2
WORKING AGED DATA: NEXT STEPS	2
MEDICARE MANAGED CARE ENROLLMENT - PAYMENT CONFERENCE	3
OODLES OF DISCOVERIES	3

ALERT:

UUNET VENDOR SERVICE ENDING



In the mid 1980's HCFA recognized the need to provide Medicare eligibility information and computer services to Managed Care Organizations(MCOs) by way of software vendors. Currently, UUNET(formerly MCI WorldCom and previously CompuServe, Inc.) and Acxiom (formerly Litton Computer Services) are the software vendors providing these services.

As of September 30, 2000, UUNET will end their long relationship with HCFA and MCOs. HCFA will add a new software vendor to replace UUNET by September 2001.

HCFA will continue to provide eligibility (Part A and Part B) entitlement files monthly to Acxiom. Acxiom can provide these same or similar services UUNET offered to the MCOs. The contact person at Acxiom is Charles Johnson and he can be reached at 818 715-5735.

Your MCO can also establish direct electronic communications with HCFA's systems. For Medicare eligibility information, you will need to contact Gloria Webster (phone 410 786-7655) to obtain Common Working File (CWF) access; contact Joanne Weller (phone 410 786-5111) for HCFA Data Center (HDC) and file upload Access; and David Evans (410 786-0412) for all other questions.

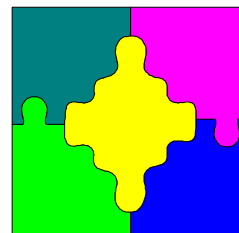
Those MCOs electing to deal directly with HCFA must allow time to set-up and/or upgrade their existing access and allow time for testing prior to monthly file submissions.

ALERT:

REVISED YEAR 2000 PLAN GHP MONTHLY SCHEDULE

The October 1, 2000 payment will not be released to the MCOs until October 2. We have revised the GHP calendar to reflect the new pay date of October 2 which was changed from September 29. The revised calendar can be found on our internet site at

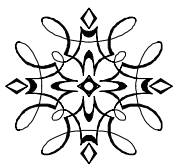
www.hcfa.gov/medicare/systinfo.htm. The changed pay date was mandated in the Balanced Budget Act. Please alert your finance departments of the change.



MISSING WORKING-AGED

TRANSACTIONS ON THE GROUCH REPORT

In the March issue of the P. O. Box publication we informed you



about the issue of Working aged updates not reaching us in time for the monthly processing by the Group Health

Plan (GHP) system. This incident occurred for the December 1999 payment, March 2000 payment and recently, the May 2000 payment.

Consequently, this has led to Medicare + Choice (M+C) plans not receiving a working aged payment adjustment on these months. However, the retro payments were paid and shown on the following GROUCH reports.

We understand the missed updates raise concerns in the timing of your payment adjustments. To address your concerns, we would like to explain the update process. Prior to October 1999, the Common Working File (CWF) host sites sent CWF updates to HCFA by mail. This process delayed CWF updates two to three months before reaching the GHP. Hence, the turnaround time for your M+C plan to

receive Working aged retro payment adjustments was delayed by two to three months as well. After October 1999, CWF file updates to the GHP are now sent using HCFA's Network Data Mover (NDM) technology. This resulted in a faster turnaround time to process CWF updates. **As a result, the processing of your Working aged submissions may now take one month instead of the normal two to three months it took under the old process.** If an update is missed in GHP, two update files are processed the next month.

Now you may be wondering why your plan receives working aged payment adjustments on certain months and why other months there is little or no adjustments. Occasionally, CWF updates do not arrive in time for the GHP to process on the current month. The receipt of these updates sometimes coincides with our managed care production processing schedule. If CWF updates are received before the GHP's second monthly production run occurs, WA retroactive payment will show on the current GROUCH reports. However, if CWF updates are received after the second monthly run, WA retroactive payment adjustment will show on next months' GROUCH reports. We will consult with other

HCFA components to see if CWF updates can be done on the first full week of the month in order to process WA payment adjustments in the month they are received. If you have any questions regarding this issue please contact the Health Plan Payment and Operations Support (HPPOS) action desk at (410) 786-7613.

WORKING AGED DATA: NEXT STEPS

HCFA recently had discussions regarding the consolidation of Part B carrier functions pertaining to the update of Medicare Secondary Payer (MSP) information. HCFA has hired a

Coordination of Benefit (COB) contractor that will serve as the single source for processing all MSP activity.

We believe this strategy will greatly enhance the MSP/Working aged process and would improve the integrity of MSP information in the Common Working File (CWF). We also believe this will considerably improve your Medicare Managed Care operations dealing with



working aged corrections. HCFA expects to implement this new process early in 2001. Until then, you are to send working aged corrections your Managed Care Organization (MCO) is unable to resolve to the Part B Carrier. We will keep you informed of the Part B Carrier/COB transitional changes as we receive more information.

In the meantime, we will continue to make further refinements to other working aged processes to allow smooth processing of working aged data submitted by your MCO. Our next steps are to re-evaluate the requirements of the McCoy Working aged HUSP record screens to see if enhancements are needed. We also plan to implement a new report on the Grouch system to display the status of your MCO's submitted working aged transactions. We understand the somewhat frustrating experiences your MCO has had in dealing with the identification and the processing of working aged information. Again, we thank you for your time and patience in dealing with this process. If you have any questions, please call our action desk at (410) 786-7613.

MEDICARE MANAGED CARE ENROLLMENT -

PAYMENT CONFERENCE

The 2000 Medicare Managed Care Enrollment and Payment Conference which was planned for the week of September 18, 2000 has been changed to the week of March 27, 2001. The change allows us to introduce managed care organizations to the new Medicare Beneficiary Database (MBD). This database, which will be a new source of beneficiary information, is scheduled to be operational in April 2001. In order to provide managed care organizations with training, a decision was made to coordinate the Enrollment and Payment Conference with the MBD implementation.

We regret any inconvenience that this schedule change may have caused your organization, but we felt the opportunity to introduce this new system was a compelling factor.

We will also hold another conference in September 2001 to address the Balance Budget Act (BBA) enrollment changes which will be implemented in January 01, 2000.



OODLES OF DISCOVERIES

CORRECTION TO OPL 119-- ATTACHMENT A

Instructions for Assignment of Unique Physician Identification Numbers(UPINs) for Medicare+Choice Organization (M+CO) Providers for Physician Encounter Data Collection-- (OPL119)

After the release of Operational Policy Letter (OPL) number 119, an error was detected on the **second page** of **ATTACHMENT A**. After item #6 (the word **downloaded**) it should proceed with the following instructions:

The user should continue to press PF3 (this function key takes you back a screen) until either the Primary Option menu (ISPF screen) or the TSO **READY** prompt is reached. At the **READY** prompt (**only**) follow the instructions for **6a**)

through **6e**), and then **continue** with **item number 7**.

HINT: *If you are not at the TSO (READY) prompt the file will not **download** correctly.*

WORKING AGED RECORD CLEAN UP PROCESS

As of July 07, 2000, working aged HUSP records with "P" (Pending) and "A" (Accepted) statuses will be removed from the MCCOY online. Only HUSP records submitted prior to October 31, 1998 will be removed from the MCCOY system. These HUSP records have already been processed in the past and will not have an impact on any future payments to your Managed Care Organization (MCO).

NEW SOURCE CODES ON THE CWF MSP SCREEN

Effective April 2000, the Common Working File (CWF) began assigning new Source Code Numbers for entities submitting Medicare Secondary Payer Information(MSP) on the CWF. Previously Managed Care Organizations (MCOs) were assigned source code '55555' to identify HUSP records submitted by MCOs. This source code has change to '11103'. Please make

a note of this number. We will send a letter to your MCO describing all the source codes from different entities in the months to come.

IMMUNOSUPPRESSIVE DRUG BENEFIT CHANGE

Look on our website for an alert on the Immunosuppressive Drug claims processing procedures in the next few week!